| | | | (|
|---|--|---|---------|
| State | of Rhode Island and Pro Office of the Secreta | | \$50.00 |
| | Division Of Business 148 W. River S Providence RI 0290 (401) 222-20 | treet)4-2615 | |
| HOPE | (401) 222-30 | 40 | |
| Foreign Business Corpor Annual Report Filing Period: January 1 - March 1 | | | |
| In accordance with R.I.G.L. 7-1.2 annual report within thirty (30) day (c&d)) is subject to a penalty fee | vs after the time prescribed by I | | |
| ANNUAL REPORT YEAR: 2017 | 7 | | |
| 1. Corporate ID No. 0001 | <u>13523</u> | | |
| 2. Name of Corporation \underline{UMI} | R, Inc. | | |
| 3. Street Address Principal Bu | siness Office: | | |
| No. and Street:11 SCOTCity or Town:WAUSA | <u>TT STREET</u> <u>U</u> State: <u>W</u> | <u>/I</u> Zip: <u>54403</u> Country: <u>USA</u> | |
| 4. Business Phone No. | | | |
| | | | |
| 5. State of Incorporation | | | |
| State: <u>DE</u> | | | |
| | ARTICLE III | | |
| Using the following NAICS code | s, please select the code that b | est describes your business. | |
| NAICS Code | | <u>6</u> <u>81</u> | |
| 6. Brief Description of the Cha | racter of Business Conducte | d in Rhode Island | |
| | | | |
| EMPLOYEE BENEFIT PLAN PROCESSING SERVICES | N ADMINISTRATOR, THIE | D PARTY ADMINISTRATOR | |
| 7. Names and Addresses of th | e Officers and Directors: | | |
| All officers and directors m | ust be listed. | | |
| Title | Individual Name | Address | |
| | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Cour | ntry |
| PRESIDENT | JAY MICHAEL ANLIKER | 11 SCOTT ST,STE 100 WAUSAU, WI 54403 USA | |

| TREASURER | ROBERT WORTH OBERRENDER | | 9900 BREN ROAD EAST MINNETONKA, MN 55343 USA | | | |
|--|---|---|---|---|--|--|
| SECRETARY | KIMBERLY MARIE H | KIMBERLY MARIE HIATT | | 5151 PFEIFFER ROAD CINCINNATI, OH 45242 USA | | |
| DIRECTOR | BRUCE PAUL CZE | BRUCE PAUL CZECH | | 11 SCOTT STREET WAUSAU, WI 54403 USA | | |
| DIRECTOR | JAY MICHAEL ANLI | JAY MICHAEL ANLIKER | | 11 SCOTT ST,STE 100 WAUSAU, WI 54403 USA | | |
| 8. Shares Authorized and Is | sued | | | | | |
| Class of Stock | Series of Stock | Par Val | ue Per Share | Total Authorized Shares Number of Shares | Total Issued and Outstanding <i>Num of</i> <i>Shares</i> | |
| CWP | | \$ | 0.0100 | 1,000.00 | 100 | |
| 9. This report must be exec corporation is in the hand corporation by the receiv | Is of a receiver or trus | | | | | |
| corporation is in the hand | Is of a receiver or truster or truster or trustee. Tary, 2017 at 5:10:55 trument constitutes the of perjury, that this in. ation, and that the fac- ince with R.I. Gen. La | PM. This PM. This e affirma strument ts stated ws § 7-1. | report must is electronic tion or ackn is that indiv herein are the 2. | be executed on b signature of the i owledgement of t idual's act and d | ehalf of the ndividual or the eed or the | |
| corporation is in the hand corporation by the receiv Signed this 26 Day of Jam individuals signing this ins signatory, under penalties a act and deed of the corpora electronic filing, in complia By <u>KELLY LETTMANN</u> | Is of a receiver or truster or truster or trustee. Tary, 2017 at 5:10:55 trument constitutes the of perjury, that this in. ation, and that the fac- ince with R.I. Gen. La | PM. This PM. This e affirma strument ts stated ws § 7-1. | report must is electronic tion or ackn is that indiv herein are the 2. | be executed on b signature of the i owledgement of t idual's act and d | ehalf of the ndividual or the eed or the | |